

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

STAND UP FOR OHIO PAC

ADDRESS (number and street)

112 SOUTH WATER SUITE B

Check if different  
than previously  
reported. (ACC)

KENT

OH

44240

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00586610

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
07 01 2016

through

M M / D D / Y Y Y Y Y Y  
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

McMahon, Heather, , ,

Type or Print Name of Treasurer

Signature of Treasurer

McMahon, Heather, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
01 16 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

STAND UP FOR OHIO PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	80216.52	
(c) Total Receipts (from Line 19) .....	83269.94	230552.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	163486.46	230552.37
7. Total Disbursements (from Line 31).....	163294.87	230360.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	191.59	191.59
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	68269.94	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**STAND UP FOR OHIO PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

0.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

15000.00

142500.01

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

15000.00

142500.01

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

68269.94

87773.39

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

278.97

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

83269.94

230552.37

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

83269.94

230552.37

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	104888.31	171954.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	104888.31	171954.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	38903.11	38903.11
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	19503.45	19503.45
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	163294.87	230360.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	163294.87	230360.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15000.00	142500.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	142500.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	104888.31	171954.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	278.97
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	104888.31	171675.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 80  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MOVEON.ORG POLITICAL ACTION**

Mailing Address PO BOX 96142

City  
WASHINGTON

State  
DC

Zip Code  
20090

FEC ID number of contributing  
federal political committee.

C

C00341396

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142500.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2016

Transaction ID : SA11C.4216

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

15000.00

**TOTAL** This Period (last page this line number only)..... ►

15000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 80  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19628.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 25 / 2016

**Transaction ID : SA13.4492**

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Gas

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21728.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

**Transaction ID : SA13.4281**

Amount of Each Receipt this Period

2100.09

☐ Memo Item  
Payment for Office Equipment- ipods, charges & accessories

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

23156.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

**Transaction ID : SA13.4554**

Amount of Each Receipt this Period

1428.14

☐ Memo Item  
Payment for Administrative/Operational Staff

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3653.23

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 80

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23492.68

Date of Receipt

MM / DD / YYYY  
09 / 07 / 2016

**Transaction ID : SA13.4288**

Amount of Each Receipt this Period

336.00

☐ Memo Item  
Payment for Gas Cards

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24240.48

Date of Receipt

MM / DD / YYYY  
09 / 09 / 2016

**Transaction ID : SA13.4556**

Amount of Each Receipt this Period

747.80

☐ Memo Item  
Payment for Office Supplies- Chargers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

24716.34

Date of Receipt

MM / DD / YYYY  
09 / 11 / 2016

**Transaction ID : SA13.4557**

Amount of Each Receipt this Period

475.86

☐ Memo Item  
Payment for Office Supplies- Chargers

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1559.66



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 80

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24852.30

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 13 / 2016

**Transaction ID : SA13.4277**

Amount of Each Receipt this Period

135.96

☐ Memo Item

Payment of Internet- AT&T

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24866.29

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 13 / 2016

**Transaction ID : SA13.4558**

Amount of Each Receipt this Period

13.99

☐ Memo Item

Payment for Office Supplies- Chargers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

28011.24

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 14 / 2016

**Transaction ID : SA13.4285**

Amount of Each Receipt this Period

3144.95

☐ Memo Item

Payment for Office Equipment- ipods, charges & accessories

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3294.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 80

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28347.24

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2016

**Transaction ID : SA13.4283**

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payment for Gas Cards

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30720.98

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2016

**Transaction ID : SA13.4292**

Amount of Each Receipt this Period

2373.74

☐ Memo Item

Payment for Office Equipment- ipods, charges & accessories

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

30934.98

Date of Receipt

MM / DD / YYYY  
09 / 15 / 2016

**Transaction ID : SA13.4559**

Amount of Each Receipt this Period

214.00

☐ Memo Item

Payment for Gas Cards

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2923.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 80

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34550.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA13.4273**

Amount of Each Receipt this Period

3615.11

☐ Memo Item  
Cavassor Payroll

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39480.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA13.4344**

Amount of Each Receipt this Period

4930.09

☐ Memo Item  
Administrative/Operational Payroll

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

74940.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

**Transaction ID : SA13.4275**

Amount of Each Receipt this Period

35460.58

☐ Memo Item  
Cavasser Payroll 9/30

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44005.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 80

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75030.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

**Transaction ID : SA13.4282**

Amount of Each Receipt this Period

89.60

☐ Memo Item

Payment for Office Supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75178.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

**Transaction ID : SA13.4286**

Amount of Each Receipt this Period

148.45

☐ Memo Item

Payment for Office Supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

75268.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

**Transaction ID : SA13.4289**

Amount of Each Receipt this Period

89.60

☐ Memo Item

Payment for Office Supplies

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

327.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 80

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75358.01

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2016

**Transaction ID : SA13.4290**

Amount of Each Receipt this Period

89.60

☐ Memo Item

Payment for Office Supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75372.00

Date of Receipt

MM / DD / YYYY  
09 / 21 / 2016

**Transaction ID : SA13.4561**

Amount of Each Receipt this Period

13.99

☐ Memo Item

Payment for Office Supplies- Chargers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

75924.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2016

**Transaction ID : SA13.4284**

Amount of Each Receipt this Period

552.00

☐ Memo Item

Payment for Gas Cards

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

655.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 80

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

76924.00

Date of Receipt

MM / DD / YYYY  
09 / 23 / 2016

**Transaction ID : SA13.4276**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Payment of Rent- National Association of Postal Carriers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

81257.62

Date of Receipt

MM / DD / YYYY  
09 / 23 / 2016

**Transaction ID : SA13.4287**

Amount of Each Receipt this Period

4333.62

☐ Memo Item

Payment for Office Equipment- ipods, charges & accessories

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

81309.72

Date of Receipt

MM / DD / YYYY  
09 / 26 / 2016

**Transaction ID : SA13.4363**

Amount of Each Receipt this Period

52.10

☐ Memo Item

Payment for Printing

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5385.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 80

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82194.09

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2016

**Transaction ID : SA13.4291**

Amount of Each Receipt this Period

884.37

☐ Memo Item  
Payment for Gas Cards

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82285.22

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2016

**Transaction ID : SA13.4362**

Amount of Each Receipt this Period

91.13

☐ Memo Item  
Payment for Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

87773.39

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2016

**Transaction ID : SA13.4345**

Amount of Each Receipt this Period

5488.17

☐ Memo Item  
Administrative Payroll

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6463.67

68269.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Equipment- Chargers

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4593

Amount of Each Disbursement this Period

747.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 345 Boren Ave N

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Equipment- Chargers

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4595

Amount of Each Disbursement this Period

475.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 345 Boren Ave N

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Equipment- Chargers

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4599

Amount of Each Disbursement this Period

13.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1237.65

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 345 Boren Ave N

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Equipment- Chargers

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				2	1						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4606

Amount of Each Disbursement this Period

13.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Apple, Inc.**

Mailing Address 1 Infinite Loop

City  
CupertinoState  
CAZip Code  
95014Purpose of Disbursement  
Office equipment- ipods

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				0	2						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4564

Amount of Each Disbursement this Period

2100.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Apple, Inc.**

Mailing Address 1 Infinite Loop

City  
CupertinoState  
CAZip Code  
95014Purpose of Disbursement  
Office equipment- ipods

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				1	4						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4596

Amount of Each Disbursement this Period

5504.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7618.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Apple, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Mailing Address 1 Infinite Loop

City  
CupertinoState  
CAZip Code  
95014Purpose of Disbursement  
Office equipment- ipods

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.4609**

Amount of Each Disbursement this Period

4333.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Damiano, Michael, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2016

Mailing Address 863 Cedar Way  
#802City  
BoardmanState  
OHZip Code  
44512Purpose of Disbursement  
Reimbursement of Expenses

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.4243**

Amount of Each Disbursement this Period

197.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Damiano, Michael, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Mailing Address 863 Cedar Way  
#802City  
BoardmanState  
OHZip Code  
44512Purpose of Disbursement  
Reimbursement for expenses

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.4263**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4630.63

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. EAN Services**

Mailing Address P.O. Box 40298

City  
AtlantaState  
GAZip Code  
30384Purpose of Disbursement  
Rental Car

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4259

Amount of Each Disbursement this Period

1247.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EAN Services**

Mailing Address P.O. Box 40298

City  
AtlantaState  
GAZip Code  
30384Purpose of Disbursement  
Rental Car

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4248

Amount of Each Disbursement this Period

975.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EAN Services**

Mailing Address P.O. Box 40298

City  
AtlantaState  
GAZip Code  
30384Purpose of Disbursement  
rental care

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4260

Amount of Each Disbursement this Period

888.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3112.14

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. EAN Services**

Mailing Address P.O. Box 40298

City  
AtlantaState  
GAZip Code  
30384Purpose of Disbursement  
Rental Car

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	0				2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4261

Amount of Each Disbursement this Period

902.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FLOC**

Mailing Address 1221 Broadway Street

City  
ToledoState  
OHZip Code  
43609Purpose of Disbursement  
Paid Canvass

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	3				2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4299

Amount of Each Disbursement this Period

7200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Garcia, James, , ,**

Mailing Address 16030 S 14th Dr

City  
PhoenixState  
AZZip Code  
85045Purpose of Disbursement  
Consultant Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	7				2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4250

Amount of Each Disbursement this Period

2479.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10582.55

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Garcia, James, , ,**

Mailing Address 16030 S 14th Dr

City  
PhoenixState  
AZZip Code  
85045Purpose of Disbursement  
Consulting Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4256**

Amount of Each Disbursement this Period

2442.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hunter, Carnahan, Shoub, Byard & Harshman**Mailing Address 3360 Tremont Rd  
Suite 230City  
ColumbusState  
OHZip Code  
43221Purpose of Disbursement  
legal fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4251**

Amount of Each Disbursement this Period

598.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JVA Campaigns**

Mailing Address 240 N 5th St #360

City  
ColumbusState  
OHZip Code  
43215Purpose of Disbursement  
Printing of Cards

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4245**

Amount of Each Disbursement this Period

1066.01

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4106.88

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. JVA Campaigns**

Mailing Address 240 N 5th St #360

City  
ColumbusState  
OHZip Code  
43215Purpose of Disbursement  
Pledge to vote cards

006

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

FEC Identification Number

C

**Transaction ID : SB21B.4257**

Amount of Each Disbursement this Period

1900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kroger**

Mailing Address 1014 Vine Street

City  
CincinnatiState  
OHZip Code  
45202Purpose of Disbursement  
Gas Card

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

FEC Identification Number

C

**Transaction ID : SB21B.4591**

Amount of Each Disbursement this Period

336.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kroger**

Mailing Address 1014 Vine Street

City  
CincinnatiState  
OHZip Code  
45202Purpose of Disbursement  
Gas Card

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C

**Transaction ID : SB21B.4600**

Amount of Each Disbursement this Period

550.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2786.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Kroger**

Mailing Address 1014 Vine Street

City  
CincinnatiState  
OHZip Code  
45202Purpose of Disbursement  
Gas Card

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4607**

Amount of Each Disbursement this Period

677.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kroger**

Mailing Address 1014 Vine Street

City  
CincinnatiState  
OHZip Code  
45202Purpose of Disbursement  
Gas Card

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4611**

Amount of Each Disbursement this Period

759.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Madison Graphics**

Mailing Address 13130 Detroit Ave

City  
ClevelandState  
OHZip Code  
44107Purpose of Disbursement  
Signs, buttons, t-shirts

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4254**

Amount of Each Disbursement this Period

4989.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6425.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

City  
DallasState  
TXZip Code  
75235Purpose of Disbursement  
Air travel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4242

Amount of Each Disbursement this Period

188.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

City  
DallasState  
TXZip Code  
75235Purpose of Disbursement  
Air travel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4244

Amount of Each Disbursement this Period

228.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Administrative/operational payroll

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4590

Amount of Each Disbursement this Period

1428.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1846.10

**TOTAL** This Period (last page this line number only)..... ►



: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.4590

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$361.20; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 5,329.10; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$8,410.49; Angela Hall, \$2,955.35; LaShawna James, \$2,580.00; Devery McBride, \$1,035.45; Tyrell Jethrow, \$1,035.45; Vernon Morgan, \$1,035.45; DeAndra Stepp, \$992.31; Danny Williams, \$465.95

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Reimbursement of administrative staff support and payroll

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2016

FEC Identification Number

C 

Transaction ID : SB21B.4262

Amount of Each Disbursement this Period

 21412.81☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Reimbursement for payroll- July and August

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2016

FEC Identification Number

C 

Transaction ID : SB21B.4293

Amount of Each Disbursement this Period

 25549.92☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Administrative/operational payroll

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2016

FEC Identification Number

C 

Transaction ID : SB21B.4601

Amount of Each Disbursement this Period

 4930.09☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 51892.82

: 97 `A-G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.4293

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$361.20; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 5,329.10; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$8,410.49; Angela Hall, \$2,955.35; LaShawna James, \$2,580.00; Devery McBride, \$1,035.45; Tyrell Jethrow, \$1,035.45; Vernon Morgan, \$1,035.45; DeAndra Stepp, \$992.31; Danny Williams, \$465.95

Form/Schedule: SB21B

Transaction ID: SB21B.4601

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$361.20; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 5,329.10; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$8,410.49; Angela Hall, \$2,955.35; LaShawna James, \$2,580.00; Devery McBride, \$1,035.45; Tyrell Jethrow, \$1,035.45; Vernon Morgan, \$1,035.45; DeAndra Stepp, \$992.31; Danny Williams, \$465.95

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of rent

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				2	3						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4608

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Administrative/operational payroll

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				3	0						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4610

Amount of Each Disbursement this Period

5488.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				0	1						2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.4241

Amount of Each Disbursement this Period

358.33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6847.10

**TOTAL** This Period (last page this line number only)..... ►

: 97 `A-G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.4608

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$361.20; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 5,329.10; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$8,410.49; Angela Hall, \$2,955.35; LaShawna James, \$2,580.00; Devery McBride, \$1,035.45; Tyrell Jethrow, \$1,035.45; Vernon Morgan, \$1,035.45; DeAndra Stepp, \$992.31; Danny Williams, \$465.95

Form/Schedule: SB21B  
Transaction ID: SB21B.4610

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$361.20; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 5,329.10; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$8,410.49; Angela Hall, \$2,955.35; LaShawna James, \$2,580.00; Devery McBride, \$1,035.45; Tyrell Jethrow, \$1,035.45; Vernon Morgan, \$1,035.45; DeAndra Stepp, \$992.31; Danny Williams, \$465.95

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 80

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

## **A. Staples**

Mailing Address 500 Staples Dr

City  
Farmington

State  
MA

Zip Code  
01702

Purpose of Disbursement  
Office supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4255**

Amount of Each Disbursement this Period

407.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Tatem, Roy, , ,**

Mailing Address 1761 W Laredo Street

City  
Chandler

State  
AZ

Zip Code  
85224

Purpose of Disbursement  
Consultanting Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 13 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4252**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Wholesale in Motion**

Mailing Address Wholesale In Motion Group

City  
Brooklyn

State  
NY

Zip Code  
11218

Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4602**

Amount of Each Disbursement this Period

268.80

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3176.05

104262.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment for Signs and Banners

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4223

Amount of Each Disbursement this Period

2410.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment for Office Supplies

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4225

Amount of Each Disbursement this Period

838.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of payroll advances

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4226

Amount of Each Disbursement this Period

563.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3811.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment for Office Supplies

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4227

Amount of Each Disbursement this Period

199.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of Payroll Expenses 6/12 - 6/25

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4230

Amount of Each Disbursement this Period

4346.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment for staff lodging

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4231

Amount of Each Disbursement this Period

5527.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10072.15



: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB26

Transaction ID : SB26.4230

Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 \$1600.00; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$2,746.15

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of parking fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4232

Amount of Each Disbursement this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of Consultant Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4233

Amount of Each Disbursement this Period

782.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of Consultant Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB26.4234

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3407.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of Legal Fees

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

FEC Identification Number

C

Transaction ID : SB26.4239

Amount of Each Disbursement this Period

1656.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment of legal servicesCategory/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

FEC Identification Number

C

Transaction ID : SB26.4240

Amount of Each Disbursement this Period

345.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Payment for office supplies

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

FEC Identification Number

C

Transaction ID : SB26.4301

Amount of Each Disbursement this Period

211.52

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2212.52

19503.45

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 36 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4237

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

345.00

Cumulative Payment To Date

345.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 37 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4238

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

1656.00

Cumulative Payment To Date

1656.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 10 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 38 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4161

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2410.00

Cumulative Payment To Date

2410.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 20 / 2016

Date Due

M M / D D / Y Y Y Y  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 39 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4300

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

211.52

Cumulative Payment To Date

211.52

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 20 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 40 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4162

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

838.78

Cumulative Payment To Date

838.78

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 22 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 41 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4163

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

563.00

Cumulative Payment To Date

563.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 42 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4164

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

199.00

Cumulative Payment To Date

199.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 43 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4173

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

4346.15

Cumulative Payment To Date

4346.15

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 24 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SC/10

Transaction ID : SC/10.4173

Jerry Pena, 2194 W 37th St, Cleveland, OH 44113, \$2,746.15; Michael Damiano, 863 Cedar Way, #802, Boardman, OH 44512, \$1,600.00

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 45 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4166

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

5527.00

Cumulative Payment To Date

5527.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 26 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 46 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4167

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

125.00

Cumulative Payment To Date

125.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 28 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 47 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4168

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

782.00

Cumulative Payment To Date

782.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y Y  
06 / 28 / 2016

Date Due

M M / D D / Y Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 48 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4169

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2500.00

Cumulative Payment To Date

2500.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 29 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SC/10

Transaction ID : SC/10.4169

Consultant Roy Tatem, 1761 W Laredo Street, Chandler, AZ 85224

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 50 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4492

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

125.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

125.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 25 / 2016

Date Due

M M / D D / Y Y Y Y

11/1/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

125.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 51 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4281

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2100.09

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2100.09

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 02 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2100.09

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 52 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4554

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

1428.14

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1428.14

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 02 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1428.14

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 53 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4288

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

336.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

336.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 07 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

336.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 54 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4556

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

747.80

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

747.80

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 09 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

747.80

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 55 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4557

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

475.86

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

475.86

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 11 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

475.86

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 56 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4277

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

135.96

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

135.96

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 13 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

135.96

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 57 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4558

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

13.99

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

13.99

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 13 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

13.99

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 58 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4285

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

3144.95

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3144.95

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 14 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3144.95

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 59 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4283

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

336.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

336.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 15 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

336.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 60 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4292

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2373.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2373.74

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 15 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2373.74

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 61 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4559

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

214.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

214.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 15 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

214.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 62 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4273

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

3615.11

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3615.11

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3615.11

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 63 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4344

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

4930.09

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4930.09

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4930.09

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 64 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4275

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

35460.58

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

35460.58

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 20 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

35460.58

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 65 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4282

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

89.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

89.60

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 20 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

89.60

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 66 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4286

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

148.45

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

148.45

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 20 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

148.45

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 67 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4289

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

89.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

89.60

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 20 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

89.60

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 68 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4290

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

89.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

89.60

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 20 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

89.60

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 69 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4561

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

13.99

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

13.99

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 21 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

13.99

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 70 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4284

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

552.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

552.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 22 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

552.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 71 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4276

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 72 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4287

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

4333.62

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4333.62

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4333.62

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 73 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4363

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

52.10

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

52.10

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 26 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

52.10

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 74 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4291

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

884.37

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

884.37

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 29 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

884.37

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 75 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4362

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

91.13

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

91.13

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 29 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

91.13

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 76 OF 80

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4345

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

5488.17

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5488.17

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 30 / 2016

Date Due

M M / D D / Y Y Y Y

10/15/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5488.17

**TOTALS** This Period (last page in this line only)..... ►

68269.94

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 77 OF 80  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>STAND UP FOR OHIO PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00586610         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>Stand Up for Ohio</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 25 E Boardman Street #428			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1807.55</div>			Transaction ID : <b>SE.4189</b>	
City Youngstown	State OH	Zip Code 44504					
Purpose of Expenditure Canvasser Payroll			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>			Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <b>Stand Up for Ohio</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 25 E Boardman Street #428			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1807.56</div>			Transaction ID : <b>SE.4192</b>	
City Youngstown	State OH	Zip Code 44504					
Purpose of Expenditure Canvasser Payroll			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>			Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature McMahon, Heather, , ,

**[Electronically Filed]**

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 78 OF 80  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>STAND UP FOR OHIO PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00586610	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Stand Up for Ohio</b>			<input type="checkbox"/> Memo Item		
Mailing Address 25 E Boardman Street #428			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 16 / 2016		
City Youngstown		State OH	Zip Code 44504		
Purpose of Expenditure Canvasser Payroll		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>		Amount <span style="border: 1px solid black; padding: 2px;">1807.55</span>	
Name of Federal Candidate: Clinton, Hillary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1807.55</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Stand Up for Ohio</b>			<input type="checkbox"/> Memo Item		
Mailing Address 25 E Boardman Street #428			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 16 / 2016		
City Youngstown		State OH	Zip Code 44504		
Purpose of Expenditure Canvasser Payroll		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>		Amount <span style="border: 1px solid black; padding: 2px;">1807.56</span>	
Name of Federal Candidate: Strickland, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: OH		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1807.56</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">3615.11</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>McMahon, Heather, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 16 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 79 OF 80  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>STAND UP FOR OHIO PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00586610	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Stand Up for Ohio</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 30 / 2016		
Mailing Address 25 E Boardman Street #428			Amount <span style="border: 1px solid black; padding: 2px;">17730.29</span>		
City Youngstown	State OH	Zip Code 44504	Transaction ID : <b>SE.4191</b>		
Purpose of Expenditure Canvasser Payroll		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 30 / 2016		
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1807.55</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Stand Up for Ohio</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 30 / 2016		
Mailing Address 25 E Boardman Street #428			Amount <span style="border: 1px solid black; padding: 2px;">17730.29</span>		
City Youngstown	State OH	Zip Code 44504	Transaction ID : <b>SE.4194</b>		
Purpose of Expenditure Canvasser Payroll		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 30 / 2016		
Name of Federal Candidate: Strickland, Ted, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1807.56</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>McMahon, Heather, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 16 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 80 OF 80  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>STAND UP FOR OHIO PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00586610	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Stand Up for Ohio</b>				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">09 / 30 / 2016</span>	
Mailing Address 25 E Boardman Street #428				Amount <span style="margin-left: 20px;">17644.00</span>	
City Youngstown		State OH		Zip Code 44504	
Purpose of Expenditure Canvasser Payroll (48-hour Report FEC-103995)				Category/Type <span style="margin-left: 20px;">006</span> Transaction ID : <b>SE.4271</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">09 / 30 / 2016</span>	
Name of Federal Candidate: Clinton, Hillary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">19451.55</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Stand Up for Ohio</b>				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">09 / 30 / 2016</span>	
Mailing Address 25 E Boardman Street #428				Amount <span style="margin-left: 20px;">17644.00</span>	
City Youngstown		State OH		Zip Code 44504	
Purpose of Expenditure Canvasser Payroll (48-hour Report FEC-103995)				Category/Type <span style="margin-left: 20px;">006</span> Transaction ID : <b>SE.4272</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">09 / 30 / 2016</span>	
Name of Federal Candidate: Strickland, Ted, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>OH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">19451.56</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....				<span style="margin-left: 20px;">35288.00</span>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....				<span style="margin-left: 20px;"></span>	
<b>(a) TOTAL</b> Independent Expenditures .....				<span style="margin-left: 20px;">38903.11</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>McMahon, Heather, , ,</u>				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">01 / 16 / 2017</span>	

[Electronically Filed]